

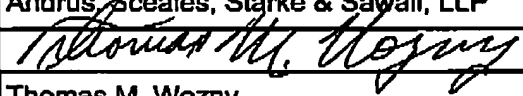
PTO/SB/21 (09-04)

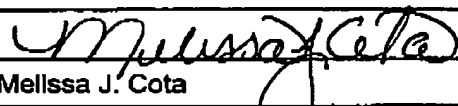
Approved for use through 07/31/2006. OMB 0951-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|-----------------------------------------------------------------------------------------|----------------------|------------------------|--------------------------------------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/544,167 | RECEIVED CENTRAL FAX CENTER APR 05 2006 |
| | Filing Date | July 29, 2005 | |
| | First Named Inventor | Amir Genosar | |
| | Art Unit | 3761 | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number | 5114-00004 |

| ENCLOSURES (Check all that apply) | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
|--------------------------------------------|-------------------------------------------------------------------------------------|-----------------|
| Firm Name | Andrus, Sceales, Starke & Sawall, LLP | |
| Signature |  | |
| Printed name | Thomas M. Wozny | |
| Date | April 5, 2006 | Reg. No. 28,922 |

| CERTIFICATE OF TRANSMISSION/MAILING | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------|
| I hereby certify that this correspondence is being facsimile transmitted to facsimile number: 571-273-8300 the USPTO on the date shown below: | | |
| Signature |  | |
| | Melissa J. Cota | Date April 5, 2006 |

Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER5114-00004

APR 05 2006

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|------------------|----------------------|---|---------------------------------------------------|
| Application No.: | 10/544,167 |) | <u>CERTIFICATE OF FACSIMILE</u> |
| | |) | |
| Applicant: | Amir Genosar |) | I hereby certify that this |
| | |) | correspondence is being transmitted |
| Filing Date: | July 29, 2005 |) | via facsimile to (571)273-8300 to |
| | |) | the attention of the Commissioner |
| Title: | DRUG INFUSION DEVICE |) | of Patents, on this 5 th day of April, |
| | |) | 2006. |
| TC/A.U. | 3761 |) | |
| Examiner | Not yet assigned |) | |
| | |) | <i>Melissa J. Cota</i> 4/5/06 |
| | |) | Melissa J. Cota Date: |

REQUEST FOR STATUS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant wishes to request the status of the above application. The last documents in Applicant's file are a Notice of Acceptance of Application Under 35 U.S.C. §371 and a Filing Receipt from the PTO both dated November 15, 2005.

A duplicate of this Request is enclosed for response.

Respectfully submitted,
ANDRUS, SCEALES, STARKE & SAWALL, LLP

By *Thomas M. Wozny*
Thomas M. Wozny
Reg. No. 28,922

Andrus, Sceales, Starke & Sawall, LLP
100 East Wisconsin Avenue, Suite 1100
Milwaukee, Wisconsin 53202
Telephone: (414) 271-7590
Facsimile: (414) 271-5770

- 1 -